

Fresenius Kidney Care 3500 Lacey Road, Downers Grove, IL 60515 T 630-960-6807 F 630-960-6812 Email: lori.wright@fmc-na.com

April 9, 2020

Ms. Courtney Avery Administrator Illinois Health Facilities & Services Review Board 525 West Jefferson, 2nd Floor Springfield, IL 62761

Re: **Annual Progress Report. Section 1130.760**

Project #17-065, Fresenius Kidney Care New Lenox

Permit Holder: Fresenius Medical Care New Lenox, LLC, and Fresenius Medical Care

Holdings, Inc.

Permit Amount: \$6,488,198

Dear Ms. Avery:

Enclosed please find the annual progress report which summarizes the status of the abovementioned project.

If you have any questions, please contact me at 630-960-6807.

Sincerely,

Lori Wright

Senior CON Specialist

loi Wryt



April 9, 2020

Annual Progress Report, Section 1130.760

Project #17-065, Fresenius Kidney Care New Lenox

Permit Holder: Fresenius Medical Care New Lenox, LLC, and Fresenius Medical Care

Holdings, Inc.

Permit Amount: \$6,488,198

Status of the Project

This project is for the establishment of a 12-station ESRD facility located at 162 Cedar Crossings Drive, New Lenox. The project was obligated with the execution of the lease on November 30, 2018. The shell is complete, and all interior construction is expected to be complete by April 29, 2020. The facility will then be waiting for certification to be fully complete.

Application and Certificate for Payment (AIA G702)

G-702 form attached.

Anticipated Completion Date

The project is approximately 95% complete and is expected to be complete prior to December 31, 2020.



Sources and Uses of Funds

Project Costs and Sources of Funds

Line Item	Allowance/CON	Realized Costs
Preplanning Costs	N/A	N/A
Site Survey & Soil Investigation	N/A	N/A
Site Preparation	N/A	N/A
Off-site work	N/A	N/A
New Construction Contracts	N/A	N/A
Modernization	1,419,600	613,676
Contingencies	140,400	0
Architectural/Engineering	152,800	74,690
Consulting and other fees	N/A	N/A
Movable & Other Equipment	368,000	29,455
Bond Issuance Expense	N/A	N/A
Net Interest Expense during Construction	N/A	N/A
FMV of Leased Space & Equipment	4,407,398	4,407,398
Other Costs to be Capitalized	N/A	N/A
Acquisition of Building or other Property (excluding land)	N/A	N/A
Total Project Costs	\$6,488,198	
Realized Total Project Costs To Date		\$5,125,219

APPLICATIO	N AND CERTIFICA	TE FOR PAYM	ENT	100000	AIA DOCUMENT G70	2	ACCOUNTS TO	Page 1 of
TO (OWNER):	Fresenius Medical Care	PROJECT:	New Lenox IL FKC 1	00718	APPLICATION N PERIOD 1	7.75	9063.2 1/2020	Distribution to: OWNER:
FROM (CONTR.)	Cohen Architectural Woodworking	VIA (ARCHITECT):			CONTRACTOR PROJECT N		-DN-W-BO-17	ARCHITECT CONTRACTOR
CONTRACT FOR:	Millwork & Installation				CONTRACT DAT	TE:		L
CONTRACTO	OR'S APPLICATION	N FOR PAYMEN	TV	Application is mad	le for Payment, as shown below	, in connection w	ith the Contract.	
CHANGE ORDER	and the second of the second o			Continuation She	et, AIA Document G703, is attac	hed.		
Change Orders ap previous months by		ADDITIONS	DEDUCTIONS	ORIGINAL CO Net change by				\$ 112,505.00V \$ (29,090.20)V
Approved this mon	th				UM TO DATE (Line 1 + 2)			\$ 83,414.80%
Number	Date Approved			4. TOTAL COMP	LETED & STORED TO DATE			
FMC CO 001			-29090.2	5. RETAINAGE:			22333	\$ 83,414.8D v
	707410	-	20000 2	a. 10	% of Completed Work	\$	8,341.48	3_
Net change by Cha	TOTALS	29090.2	22222	b. 10	s D + E on G703) % of Stored Material			
	ites for Payment were issued and	Date:	2/25/2020	7. LESS PREVIO (Line 6: 8. CURRENT PA 9. BALANCE TO (Line 3:	FINISH, INCLUDING RETAINA ess Line 6)			\$ 75,073.32 \$ 30,376.80 \$ 44,696.52 \$ 8,341.48
	Musco	tary Public, Notary State of Missouri Crawford County ommission # 13494	1	Notary Public: 03	County of: Crawford worn to before me this 15th No. 120121	b day of	Feb	_2020
ARCHITECT'	S CERTIFICATE F	OR PAYMENT		AMOUNT CERTI	FIED			
In accordance with the contract Documents, based on on-site observations and the data			(Attach explanation	on if amount certified differs from	the amount appl	fied for.)		
comprising the above application, the Architect certifies to the Owner that to the best			ARCHITECT:		120	9.5		
6.00°00'00'00'00'00'00'00'00'00'00'00'00'0	edge, information and belief the							
the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMCUNT CERTIFIED.		Ву:			Date	B;		
NOTICE: PROPERTY OWNERS IMPORTANT INFORMATION CONCERNING MECHANICS LIENS ON REVERSE SIDE.			named herein. Issua	negotiable. The AMOUNT CERTIFIED noe, payment and acceptance of payme Contractor under this Contract.	is payable only to the int are without prejud	a Contractor FEB 1		

APPLICATION AND CERTIFICATION FOR PAYMENT

AIA DOCUMENT G702/CMa

CONSTRUCTION MANAGER-ADVISER EDITION

PAGE ONE OF 3

TO CONTRACTOR:	PROJECT:	APPLICATION NO: 2	Distribution to:			
DiNaso & Sons Construction Co., Inc. 9910 W. 191st St., Suite A	New Lenox 100718-1-DN-W-BO-17 332 Cedar Crossing Prive	PERIOD TO: March 2, 2020	X OWNER			
Mokena, IL 60448	New Lenox, IL 60451		PARCHITECT			
			AKCHITECT			
ROM SUBCONTRACTOR:	OWNER:	PROJECT NOS: 100718-1-DN-W-BO-17	X CONTRACTOR			
DiNaso & Sons Construction Co., Inc.	Presentus Medical Care New Lenox, L		_			
9910 W. 191st St., Suite A Mokena, El. 60448	C/O Fresenius Medical Care NA 1909 Tyler Street, 8th Floor	CONTRACT DATE: September 16, 2019				
CONTRACT FOR:	Hollywood, FL 33020					
General Construction						
ONTRACTOR'S APPLICATION	N EOD DAVMENT		Out and building			
application is made for payment, as shown below, in or		The undersigned Contractor certifies that to the best of the information and belief the Work covered by this Application				
Continuation Sheet, AIA Document G703, is attached.		그 내는 그는 이 소리를 가득하는 것이 아이들이 이번에 가는 하는 것이 되었다. 하는 것이 모든 것이 되었다면 하는데 없다.	completed in accordance with the Contract Documents, that all amounts have been paid by the Commetor for Work for which previous Certificates for Payment were issued and			
		payments received from the Owner, and that current payme				
ORIGINAL CONTRACT SUM	\$ 916,430.00	CONTRACTOR: DiNaso & Sons Construction	e Co. Jac			
Net change by Change Orders	S 0.00					
CONTRACT SUM TO DATE (Line 1 ± 2)	\$ 916,430.00		Day 14 - 1 2 2020			
TOTAL COMPLETED & STORED TO DATE (Column G on G703)	\$ 681,862.00	By.	Date: March 2, 2020			
RETAINAGE:		State of Illinois	County of Will			
a10 % of Completed Work \$ (Column D + E on G703)	68,186.20	Subscribed and swoon to believe me this Notary Public:	oroginarch, 2020			
b. 10 % of Stored Material	0.00	Notary Public: Austria (1./90	OFFICIAL SE			
(Column F on G703)		7-5-23	CHRISTINE AH			
Total Retainage (Lises Sn + 5b or		CERTIFICATE FOR PAYMENT	NOTARY PUBLIC - STATE			
Total in Column I of G703)	S 68,185.20		# MIT COMMITTED ON EACH			
TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total)	\$ 613,675.80	confinising the application, the Architect certifies to the Ov Architect's knowledge, information and belief the Work ha	**********			
LESS PREVIOUS CERTIFICATES FOR		the quality of the Work is in accordance with the Contract				
PAYMENT (Line 6 from prior Certificate)	\$ 360,451.8	is entitled to payment of the AMOUNT CERTIFIED.				
CURRENT PAYMENT DUE	5 253,224.06		253,224.60			
BALANCE TO FINISH, INCLUDING RETAINAG	E S 302,754.20					
(Line 3 less Line 6)		Application and on the Continuation Sheet that are chang CONSTRUCTION MANAGER:	ии to conform with the amount certified.)			
CHANGE ORDER SUMMARY	ADDITIONS DEDUCTIONS					
Total changes approved in previous months by Owner	\$0.00 \$0.00	By: ARCHITECT:	Date:			
		1-				
Total approved this Month	\$0.00 \$0.00	By:	Date: TERESA BAR DIV ADMI			
TOTALS	\$0.00 \$0.00	This Certificate is not negotiable. The AMOUNT CERTIF Contractor named herein. Issuance, payment and acceptance	TED is payable only to the			
NET CHANGES by Change Order	NET CHANGES by Change Order \$0.00		is Contract.			
		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	RECS Neath Com			